

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Shmuel BEN-SASSON

Art Unit: 1854

Application No.: 08/736,076

Conf. No. 6540

Examiner: M. Audet

Filed: December 13, 2000

Washington, D.C.

For: SHORT PEPTIDES WHICH SELECTIVELY MODULATE ...

Atty.'s Docket: BEN-SASSON=2B

Date: November 12, 2003

THE COMMISSIONER OF PATENTS
 2011 South Clark Place
 Crystal Plaza Two, Lobby, Room 1B03
 Arlington, VA 22202

VIA TELEFACSIMILE

Sir,

Transmitted herewith is a (XX) Amendment []

in the above-identified application.

- [] Small Entity Status: Applicant(s) claim small entity status. See 37 C.F.R. §1.27.
 [] No additional fee is required.
 (XX) The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA EQUALS
TOTAL	- 55	MINUS	- 50	5
INDEP.	- 1	MINUS	- 17	0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY	
RATE	ADDITIONAL FEE
x 9	\$
x 43	\$
+ 145	\$
ADDITIONAL FEE TOTAL	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
x 18	\$ 90.00
x 86	\$
+ 200	\$
TOTAL	

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest Number Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

(XX) Conditional Petition for Extension of Time

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

[] It is hereby petitioned for an extension of time in accordance with 37 CFR 1.136(a). The appropriate fee required by 37 CFR 1.17 is calculated as shown below:

Small Entity

Response Filed Within

- [] First - \$ 55.00
 [] Second - \$ 210.00
 [] Third - \$ 475.00
 [] Fourth - \$ 740.00

Month After Time Period Set

[] Less fees (\$_____) already paid for ____ month(s) extension of time on _____.

Other Than Small Entity

Response Filed Within

- [] First - \$ 110.00
 [] Second - \$ 420.00
 [] Third - \$ 950.00
 [] Fourth - \$ 1480.00

Month After Time Period Set

[] Please charge my Deposit Account No. 02-4035 in the amount of \$_____.

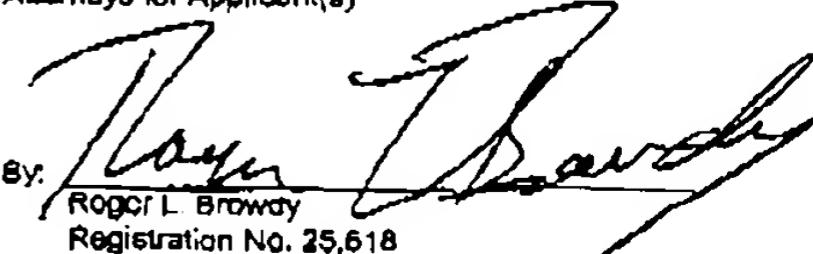
(XX) Credit Card Payment Form, PTO-2038, is attached, authorizing payment in the amount of \$90.00_____.

[] A check in the amount of \$_____ is attached (check no.).

(XX) The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR §1.16 and all patent processing fees under 37 CFR §1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR §1.18.

BROWDY AND NEIMARK, P.L.L.C.

Attorneys for Applicant(s)

By: 
 Roger L. Browdy
 Registration No. 25,618

Faximile: (202) 737-3820
 Telephone: (202) 628-5187

Approved for use through 02/28/2006. OMB 0651-0043

United States Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

United States Patent and Trademark Office**Credit Card Payment Form****Please Read Instructions before Completing this Form****Credit Card Information**

Credit Card Type: Visa MasterCard American Express Discover

Credit Card Account #: 9727-126626-01004

Credit Card Expiration Date: 08/07

Name as It Appears on Credit Card: Roger L. Browdy

Payment Amount: \$ (US Dollars): 90.00

Cardholder Signature: *Roger L. Browdy*

Date: 11/14/03

Refund Policy: The Office may refund a fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The office will not refund amounts of \$25.00 or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR § 1.26). Refund of a fee paid by credit card will be issued as a credit to the credit card account to which the fee was charged.

Service Charge: There is a \$50.00 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR § 1.21 (m)).

Credit Card Billing Address

Street Address 1: 624 Ninth Street, NW

Street Address 2:

City: Washington

State/Province: DC

Zip/Postal Code: 20001

Country: USA

Daytime Phone #: (202)628-5197

Fax #: (202)737-3528

Request and Payment Information

Description of Request and Payment Information:

<input type="checkbox"/> Patent Fee	<input type="checkbox"/> Patent Maintenance Fee	<input type="checkbox"/> Trademark Fee	<input type="checkbox"/> Other Fee
Application No. <i>09/756,076</i>	Application No.	Application No.	IDON Customer No.
Patent No.	Patent No.	Registration No.	
Attorney Docket No. <i>BEN-SASSON - J&</i>		Identify or Describe Mark	

If the cardholder includes a credit card number on any form or document other than the Credit Card Payment Form, the United States Patent and Trademark Office will not be liable in the event that the credit card number becomes public knowledge.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Atty. Docket: BEN-SASSON=2B

In re Application of:) Conf. No.: 6540
Shmuel BEN-SASSON)
Appln. No.: 09/736,076) Art Unit: 1654
Filed: December 13, 2000) Examiner: M. Audet
For: SHORT PEPTIDES WHICH) Washington, D.C.
SELECTIVELY MODULATE ...) November 12, 2003
)
) **VIA TELEFACSIMILE**

SUPPLEMENTAL AMENDMENT

Honorable Commissioner for Patents
U.S. Patent and Trademark Office
2011 South Clark Place
Crystal Plaza Two, Lobby, Room 1B03
Arlington, VA 22202

Sir:

Supplementing applicant's response of August 12,
2003, please amend as follows:

**Amendments to the Claims are reflected in the
listing of claims that begins on page 2 of this paper.**

Remarks/Arguments begin on page 30 of this paper.